Mental Health Expenses

Therapist Documentation Requirements

Compensation of mental health expenses are subject to timely and accurate filing of required documents. <u>Delays in</u> filing may result in delays in compensation.

Treatment Plans & Reviews:

- a) Mental Health Treatment Plan This form must be completed by each therapist and submitted to either the crime investigator at the Sheriff's office of jurisdiction, or the Louisiana Crime Victim's Reparations Board (CVRB). This form should be submitted within 3 months of treatment onset and should indicate the relationship between the victim's symptoms/treatment and the experience of the reported crime.
- b) Mental Health Treatment Update This form must be completed by each therapist and submitted every 6 months during the life of the case. Cases that temporarily cease treatment and later return should have an immediate treatment update submitted if it has been longer than 6 months since the last update was submitted.
- c) Mental Health Treatment Review Depending upon the nature of the crime, many victims will evidence reasonable stabilization following six months to a year of continuous care. Cases that fail to show reasonable stabilization during this time period may be subject to review in order to be eligible for continued compensation.

Reimbursement Rates & Limits:

- a) Current reimbursement rates are \$85 per 1-hour session for doctoral-level therapists, \$75 per 1-hour session for masters-level therapists, and \$30 per group for group therapy. Initial diagnostic interview sessions (90801) are reimbursed at 1.5 the hourly rate and limited to 1 per therapist.
- b) Claimants are eligible for up to \$2500 in outpatient mental health services for the life of the case. Application for extended outpatient mental health compensation of up to an additional \$2500 is available, but is subject to review of an independent psychological or neuropsychological evaluation. The evaluation should document current Axis I or Axis II disorders and significant difficulty in current functioning (e.g., global assessment of functioning indicative of significant impairment). The CVRB is available for references and will reimburse up to \$800 for a psychological evaluation with report, and up to \$1500 for a neuropsychological evaluation with report.

Payments & Expense Verification:

- a) Reimbursements from the CVRB are made after all other sources of payments are made. When insurance is available, evidence must be provided that insurance has been processed and applied accordingly (this includes out-of-network benefits). The therapist should clearly indicate when there are no insurance or other third-party payers available for compensation.
- b) The board has no contract with providers, and thus does not stipulate "allowable" charges. However, the CVRB will only reimburse the difference between the total amount of third-party payments (e.g., insurance payments) and the board's per-session limit.
- c) Payments will generally go toward out-of-pocket expenses on the part of the victim first. Any remaining balance that is still within the reimbursable limits of the board will be paid to the provider.

Eligible Claimants:

- a) **Primary Victim** any individual directly victimized by a criminal activity.
- **b)** Secondary Victim * any direct family member(s), or a person in a close relationship (i.e., living in home) to a victim of homicide.
- * An exception is made for direct family members of sexual abuse victims who participate in <u>conjoint therapy</u> (i.e., therapy that also involves the primary victim)